



Current Effective Date: 12/29/24

Status: Approved

Reviewed by Medical Policy Subcommittee: 2/6/20, 12/14/23, 12/29/24

Reviewed Dates: 1/9/20, 8/4/22, 12/14/23, 12/18/24

INSTRUCTIONS FOR USE DISCLAIMER:

SummaCare posts policies relating to coverage and medical necessity issues to assist members and providers in administering member benefits. These policies do not constitute a contract or agreement between SummaCare and any member or provider. The policies are guidelines only and are intended to assist members and providers with coverage issues. SummaCare is not a health care provider, does not provide or assist with health care services or treatment, and does not make guarantees as to the effectiveness of treatment administered by providers. The treatment of members is the sole responsibility of the treating provider, who is not an employee of SummaCare, but is an independent contractor in private practice. The policies posted to this site may be updated and are subject to change without prior notice to members or providers.

Medical policies in conjunction with other nationally recognized standards of care are used to make medical coverage decisions.

Implantable Sinus Stents Policy Indication/Usage:

Implants for post-operative use (e.g., Propel Sinus Implant / Sinuva sinus implant). Drug-eluding stents (DESs) or implants are surgically inserted scaffolds that are proposed to aid in healing affected tissue by local and continuously releasing a loaded drug or saline in a controlled manner for the desired period of time. Some DES are made of a biodegradable material and are absorbed by the body. Commonly used drugs for nasal stents include corticosteroids (e.g., dexamethasone, fluticasone and mometasone) and antibiotics. The device is implanted during sinus surgery where it expands to prop open the sinus, support the bony structure inside the nose and is purposed to prevent scar formation.

Medical Indications for Authorization

Commercial and Medicare Members

SummaCare considers implantable sinus experimental, investigational, and unproven. There is not enough research to show they improve health outcomes.

☐ Propel and Sinuva sinus implant for treatment of nasal polyps after ethmoid sinus surgery in patient 18 years of age or older is not covered

There are currently no NCD or LCD for implantable sinus stents per CMS.

Limitations

There is not enough research to show that implantable sinus stents, with or without drug-eluting capability, can improve health outcomes for patients with recurrent polyposis or following sinus surgery compared to standard care, such as packing and saline irrigation. In addition, there are no clinical guidelines based on research that recommend the use of postoperative sinus stents. Therefore, the use of sinus stents with or without drug-eluting capability is considered investigational.

A drug-eluting device for maintaining postoperative sinus ostial patency following endoscopic sinus surgery or for the treatment of nasal polyps following ethmoid sinus surgery is considered experimental and investigational because their effectiveness has not been established.

Coverage Decisions

Coverage decisions made per CMS, Hayes, and industry standard research

Plans Covered By This Policy

Commercial and Medicare Considered experimental and investigational for all lines of business

Sources Reviewed

American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS). Position Statement: The use of biomaterials in sinonasal procedures. Sept 2015. Updated April 2021. Accessed Mar 11, 2024. Available at URL address: Position Statement: The Use of Biomaterials in Sinonasal Procedures - American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS)

Baguley CJ, Stow NW, Weitzel EK, Douglas RG. Silastic splints reduce middle meatal adhesions after endoscopic sinus surgery. Am J Rhinol Allergy. 2012 Sep-Oct; 26 (5):414-7.

Forwith KD, Han JK, Stolovitzky JP, Yen DM, Chandra RK, Karanfilov B, Matheny KE, Stambaugh JW, Gawlicka AK. RESOLVE: bioabsorbable steroid-eluting sinus implants for in-office treatment of recurrent sinonasal polyposis after sinus surgery: 6-month outcomes from a randomized, controlled, blinded study. Int Forum Allergy Rhinol. 2016 Jun; 6 (6):573-81

Hayes, Inc. Prognosis overview. Propel and Propel Mini bioabsorbable steroid-releasing sinus implants. Hayes, Inc.; Mar 2017

Hayes, Health Technology Assessment, August 14, 2018, Propel and Propel Mini Bioabsorbable Steriod Releaseing Sinus Implants for Treatment of Chronic Rhinosinusitis in Adults.

Centers for Medicare and Medicaid Services. Local Coverage Determination (LCD): Non-Covered Cateogory III 1/1/2019.

Huang, Z, Hwang, P, Sun, Y, Zhou, B. Steroid-eluting sinus stents for improving symptoms in chronic rhinosinusitis patients undergoing functional endoscopic sinus surgery. The Cochrane database of systematic reviews. 2015; 6: CD010436. PMID: 26068957

Taulu R, Bizaki AJ, Numminen J, Rautiainen M. A prospective, randomized clinical study comparing drug eluting stent therapy and intranasal corticoid steroid therapy in the treatment of patients with chronic rhinosinusitis. Rhinology. 2017 Sep 1; 55(3):218-226. doi: 10.4193/Rhin16.07

Zhao X, Grewal A, Briel M, Lee JM. A systematic review of nonabsorbable, absorbable, and steroid-impregnated spacers following endoscopic sinus surgery. Int Forum Allergy Rhinol. 2013 Nov; 3 (11):896-904.

Home - Centers for Medicare & Medicaid Services | CMS